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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Attorney Docket Number HAR-005															
In re Application of Wucherpfennig et al.																	
Application Serial No. 09/248,964																	
Filed: February 12, 1999																	
Group Art Unit: 1644	Examiner: A. M. Decloux																
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above entitled application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired)</p> <table> <tr><td><input type="checkbox"/></td><td>One month (37 CFR 1.17(a)(1))</td><td>\$ <input type="text"/> TECH CENTER 1600/2900</td></tr> <tr><td><input type="checkbox"/></td><td>Two months (37 CFR 1.17(a)(2))</td><td>\$ <input type="text"/></td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Three months (37 CFR 1.17(a)(3))</td><td>\$ <input type="text"/> 920.00</td></tr> <tr><td><input type="checkbox"/></td><td>Four months (37 CFR 1.17(a)(4))</td><td>\$ <input type="text"/></td></tr> <tr><td><input type="checkbox"/></td><td>Five months (37 CFR 1.17(a)(5))</td><td>\$ <input type="text"/></td></tr> </table> <p> <input checked="" type="checkbox"/> Applicant claims small entity status under 37 CFR 1.27; therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: <u>\$460.00</u>. </p> <p> <input checked="" type="checkbox"/> Two checks in the amounts of \$460.00 for the extension fee and \$160.00 for the Notice of Appeal fee are enclosed. </p> <p> <input type="checkbox"/> The Commissioner is hereby authorized to charge the required fee to Deposit Account No. 20-0531. Enclosed is a duplicate of this sheet. </p> <p> <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account No. 20-0531. </p> <p> <input checked="" type="checkbox"/> Return receipt postcard enclosed. </p> <p>I am the <input type="checkbox"/> assignee of record of the entire interest. <input type="checkbox"/> applicant. <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____.</p>			<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$ <input type="text"/> TECH CENTER 1600/2900	<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$ <input type="text"/>	<input checked="" type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$ <input type="text"/> 920.00	<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$ <input type="text"/>	<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$ <input type="text"/>
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CORRESPONDENCE ADDRESS		SIGNATURE BLOCK															
Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibeault, LLP High Street Tower 125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100		Respectfully submitted, Brian A. Fairchild Agent for Applicant(s) Testa, Hurwitz & Thibeault, LLP High Street Tower 125 High Street Boston, MA 02110															

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